

## NOTICE OF INTENT

Name of Restaurant: \_\_\_\_\_

### Owner Information

Legal Name of Owner: \_\_\_\_\_

Designated Owner representative, and title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Restaurant Information

Designated on-site representative, and title: \_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address (if different from street address):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

Size, type and location of grease trap(s) (may attach drawings):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Location of sampling point (may attach drawings):

\_\_\_\_\_

\_\_\_\_\_

The above facility hereby notifies the City of Shreveport of its intent to discharge wastewater from the above location into the City's sanitary sewer system, submits this Notice of Intent to be covered by the City of Shreveport's General Permit for Wastewater Discharges from Restaurants, and agrees to all terms and conditions of the permit.

Signature, Authorized Representative of Restaurant: \_\_\_\_\_

Name (Print): \_\_\_\_\_

Date: \_\_\_\_\_